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Dated: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Gloria Fuentes)

Docket No.: WIBL-P01-561  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Golub et al.

Confirmation No. 2026

Application No.: 10/066,305

Art Unit: 1642

Filed: January 31, 2002

Examiner: Karen A. Canella

For: BRAIN TUMOR DIAGNOSIS AND  
OUTCOME PREDICTION

**AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION**

MS Non-Fee Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

This Amendment is filed in response to the Office Action mailed December 31, 2003 in the above-identified application. Reconsideration and further examination are requested. Please amend the above-identified U.S. patent application as follows:

**Amendments to the Specification** begin on page 2 of this paper.

**Amendments to the Claims** begin on page 3 of this paper.

**Remarks/Arguments** begin on page 9 of this paper.



<b>AMENDMENT TRANSMITTAL LETTER</b>			Docket No. WIBL-P01-561
Application No. 10/066,305	Filing Date January 31, 2002	Examiner K. A. Canella	Art Unit 1642

Applicants: Golub, *et al.*

Invention: BRAIN TUMOR DIAGNOSIS AND OUTCOME PREDICTION


**TO THE COMMISSIONER FOR PATENTS**

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	22	- 33 =	0	x	
Independent Claims	4	- 7 =	0	x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					0.00

- ☒ Large Entity ☐ Small Entity
- ☒ No additional fee is required for this amendment.
- ☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_.  
A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of \$ \_\_\_\_\_ to cover the filing fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge and credit Deposit Account No. 18-1945  
as described below. A duplicate copy of this sheet is enclosed.
- ☒ Credit any overpayment.
- ☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

  
Gloria Fuentes  
Attorney Reg. No.: 47,580

Dated: March 31, 2004

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Dated: 3/31/04

Signature:  ( )